

PATENT

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Shana Smith

(signature)

Date of signature and deposit - 3-15-05

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
MICHAEL L. BABALA)	Group Art Unit 2856
)	
Serial No. 10/679,794)	
Confirmation No. 3701)	Examiner John E. Chapman, Jr.
)	
Filed: October 6, 2003)	
)	
For: MULTIPLE OUTPUT INERTIAL)	Attorney Docket 1-24754
SENSING DEVICE)	

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SUPPLEMENTARY RULE 116 AMENDMENT

Honorable Sir:

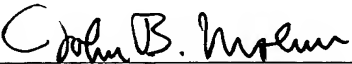

This Amendment is being submitted in response to the Final Office Action Letter dated January 21, 2005, and the Advisory Action dated February 23, 2005. Applicant respectfully requests that the above-identified application be amended as indicated on the following pages.

Respectfully submitted,

John B. Molnar

John B. Molnar
Reg. No. 31,914

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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 1-24754	
Applicant(s): Michael L. Babala					
Application No. 10/679,794	Filing Date October 6, 2003	Examiner John E. Chapman, Jr.	Customer No. 46582	Group Art Unit 2856	Confirmation No. 3701
Invention: MULTIPLE OUTPUT INERTIAL SENSING DEVICE					
<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	9 -	21 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 13-0005 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 _____ Signature			Dated: March 15, 2005		
John B. Molnar, Reg. No. 31,914 MacMillan, Sobanski & Todd, LLC One Maritime Plaza, Fourth Floor 720 Water Street Toledo, Ohio 43604 Telephone: 419-255-5900 Facsimile: 419-255-9639 email: molnar@mstfirm.com			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on March 15, 2005 _____ (Date)  _____ Signature of Person Mailing Correspondence Geena Licata _____ Typed or Printed Name of Person Mailing Correspondence		
CC:					